| PATENT APPLICATION FEE DETERMINATION RECORD | | | | | | | | | Application or Docket Number | | | |
|---|--|---|--|-----------------------------------|--------------------|---------------------------------------|---|---------------------|------------------------------|----|---------------------|------------------------|
| Effective December 8, 2004 | | | | | | | | | 10 | 50 | 34634 | 5 |
| | | CLAIMS | (Column 1) | | | TYPE | | SMALL EN | TITY | OR | OTHER SMALL | |
| U.S | . NATIONAL | STAGE FEES | (Column 1) | | | (Column 2) | 7 | RATE | FEE | 1 | RATE | FEE |
| BASIC FEE | | | SMALL ENT. = \$ 150 | | LAR | GE ENT. = \$ 300 | 1 | BASIC FEE | | OR | BASIC FEE | 12/51 |
| EXAMINATION FEE | | | Satisfies PCT Article 33(1)- | | | ther situations = | 1 | EXAM. FEE | | - | EXAM. FEE | 200 |
| | | | (4) = \$50/\$100 U.S. is ISA = \$50/\$100 | | | \$ 100 / \$ 200 other situations = | 1 | ļ | | ┨ | EXXIVI. FEE | |
| SEARCH FEE | | | ALL other countries = \$ 200./\$ 400 | | l . | \$ 250 / \$ 500 | | SEARCH FEE | | | SEARCH FEE | 400 |
| FEE FOR EXTRA SPEC. PGS. | | | minus 100 = | | - | / 50 = | | X \$ 125 = | | | X \$ 250 = | |
| TOTAL CHARGEABLE CLAIMS | | | minus 20 = * - | | | | | X \$ 25 = | | OR | X \$ 50 = | |
| INDEPENDENT CLAIMS | | | minus 3 = * | | | | | X \$ 100 = | | OR | X \$ 200 = | |
| MUL | TIPLE DEPEN | DENT CLAIM PR | ESENT | | | Ø | | + \$ 180 = | | OR | + \$ 360 = | 3/1 |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | | | | | TOTAL | | OR | TOTAL | 1200 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST | | | | | | | | SMALL | ENTITY | OR | OTHER SMALL E | |
| AMENDMENT A | | CLAIMS REMAINING AFTER AMENDMENT | | PREVICE PAID | BER OUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRES | ENTATION OF M | IULTIPLE DEPI | TIPLE DEPENDENT CLAIM | | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | _ | | | | | TOTAL ADDIT. | | OR | TOTAL ADDIT. | |
| | | (Column 1) | | (Colum | | (Column 3) | | | | | | (). |
| AMENDMENT B | | CLAIMS REMAINING AFTER AMENDMENT | | HIGHE NUME PREVIO PAID E | EST BER USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | | RATE | ADDI- TIONAL FEE |
| | Total | * | Minus | ** | | = | | X \$ 25 = | | OR | X \$ 50 = | |
| MEN | Independent | * | Minus | *** | | = | | X \$ 100 = | | OR | X \$ 200 = | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | LAIM | | | + \$ 180 = | | OR | + \$ 360 = | |
| | | | | | | | | TOTAL ADDIT. FFF | | OR | TOTAL ADDIT. FFF | |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |

FORM PTO-875 (Rev. 02/2005)

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